

9-780041

**CLAIMS AS FILED - PART I**

(Column 1)      (Column 2)

COUNTRY		
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20 =	*
INDEPENDENT CLAIMS	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

\* If the difference in column 1 is less than zero, enter "0" in column 2.

**CLAIMS AS AMENDED - PART II**

1-7-05

(Column 1)

SMALL ENTITY TYPE <input type="checkbox"/>		OTHER THAN OR SMALL ENTITY	
RATE	Fee	RATE	Fee
BASIC FEE	385.00	OR BASIC FEE	770.00
X\$ 9=		OR X\$18=	
X43=	,	OR X86=	
+145=		OR +290=	
TOTAL		OR TOTAL	

AMENDMENT

(Column 1)

(Column 2) (Column 3)

SMALL ENTITY		OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		X\$18=	
X43=		X86=	
+ 145=		+290=	
TOTAL ADDT. FEE		TOTAL ADDT. FEE	

AMENDMENT

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RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=
X43=		OR	X86=
+145=		OR	+290=
TOTAL ADDITIONAL FEE		OR	TOTAL ADDITIONAL FEE

## **AMENDMENT**

**(Column 1)**

(Column 2) (Column 3)

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		X\$18=	
X43=		X86=	
+145=		+290=	
TOTAL ADDITIONAL FEE		TOTAL ADDITIONAL FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

**\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."**

\*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For" (Total or Independent) is the highest amount

FORM PTO-876 (Rev. 10/02)

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